

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 128

Registered No. 27

1. PLACE OF BIRTH

County Maricopa State Arizona
 District or Township Hayden or Village Hayden
 City Hayden No. 1 St. 1 War 1

2. Full name of child Margarita Estrada (If birth occurred in a hospital or institution, give its NAME instead of street and number. If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other No 6. Legitimate? Yes 7. Date of birth Mar 7 1927
 Month Mar Day 7 Year 1927

FATHER
 1. Name Mmanuel Estrada
 Residence (Usual place of abode) Hayden
 If non-resident, give place and state.

10. Color or race Mex
 11. Age at last birthday 38 (Years)

12. Birthplace (city or place) San Jose Mex
 (State or country)

13. Occupation Labour
 Nature of industry

Number of children of this mother 7
 (Taken as of time of birth of child herein certified and including this child.)

MOTHER
 14. Full maiden name Mercedes Perez
 15. Residence (Usual place of abode) Hayden
 If non-resident, give place and state.

16. Color or race Mex
 17. Age at last birthday 36 (Years)

18. Birthplace (city or place) San Jose Mex
 (State or country)

19. Occupation Housewife
 Nature of industry

20. Were precautions taken against ophthalmia neonatorum? Yes
 (a) Born alive and now living 5
 (b) Born alive but now dead 2
 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Born alive or stillborn at 10:00 A.M. on the date above stated.

Signature Charles H. Sturges
 (Physician or midwife).

Given name added from supplemental report Address

Registrar Filed Mar 10 1927 5777 Regist

451-307-477